

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Black PAC

ADDRESS (number and street)

2090 Adam Clayton Powell Jr. Blvd.

Suite 201A

Check if different
than previously
reported. (ACC)

New York

NY

10027

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00609388

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☒ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M / D D / Y Y Y Y Y Y
11 06 2018in the
State of

DC

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y
10 01 2018

through

M M / D D / Y Y Y Y Y Y
10 17 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Shropshire, Adrienne, R., ,

Type or Print Name of Treasurer

Signature of Treasurer

Shropshire, Adrienne, R., ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 25 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Black PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
10		01		2018

To:

M M	/	D D	/	Y Y Y Y Y
10		17		2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2018</td></tr></table>	Y	Y	Y	Y	Y	2018						<table><tr><td colspan="5">491909.45</td></tr></table>	491909.45				
Y	Y	Y	Y	Y													
2018																	
491909.45																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">671456.28</td></tr></table>	671456.28															
671456.28																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">2903598.95</td></tr></table>	2903598.95					<table><tr><td colspan="5">5034183.77</td></tr></table>	5034183.77									
2903598.95																	
5034183.77																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">3575055.23</td></tr></table>	3575055.23					<table><tr><td colspan="5">5526093.22</td></tr></table>	5526093.22									
3575055.23																	
5526093.22																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">1001058.98</td></tr></table>	1001058.98					<table><tr><td colspan="5">2952096.97</td></tr></table>	2952096.97									
1001058.98																	
2952096.97																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">2573996.25</td></tr></table>	2573996.25					<table><tr><td colspan="5">2573996.25</td></tr></table>	2573996.25									
2573996.25																	
2573996.25																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">219193.73</td></tr></table>	219193.73															
219193.73																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Black PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
10		01		2018

To:

M M	/	D D	/	Y Y Y Y
10		17		2018

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

2752344.28

4425722.15

(ii) Unitemized

1254.67

23816.62

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

2753598.95

4449538.77

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

150000.00

582266.67

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

2903598.95

5031805.44

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

2378.33

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

2903598.95

5034183.77

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

2903598.95

5034183.77

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	67153.43	726093.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	67153.43	726093.20
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	341561.27	371935.63
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	75.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	75.00
29. Other Disbursements (Including Non-Federal Donations).....	592344.28	1853993.14
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1001058.98	2952096.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1001058.98	2952096.97

DETAILED SUMMARY PAGE of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2903598.95	5031805.44
34. Total Contribution Refunds (from Line 28(d))	0.00	75.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2903598.95	5031730.44
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	67153.43	726093.20
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	2378.33
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	67153.43	723714.87

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 34

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. 1199 SEIU New York State Political Action Fund

Mailing Address 310 W 43rd St

FL 14

City

New York

State

NY

Zip Code

10036-3981

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

10 / 09 / 2018

Transaction ID : VTEF8V3AZ48

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ajay, Hampapur, , ,

Mailing Address 1037 Oaktree Dr

City

San Jose

State

CA

Zip Code

95129-3145

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mphasis

Occupation (for Individual)
Vice President

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 03 / 2018

Transaction ID : VTEF8TN7525

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Allen, Benjamin, , ,

Mailing Address 26 Houghton St

City

Somerville

State

MA

Zip Code

02143-4011

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Old Mutual Asset Management

Occupation (for Individual)
Information Technology

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 16 / 2018

Transaction ID : VTEF8V4EYA6

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25075.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. America Votes

Mailing Address 1155 Connecticut Ave NW
Ste 600

City
Washington

State
DC

Zip Code
20036-4324

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 12 / 2018

Transaction ID : VTEF8V3AX18

Amount of Each Receipt this Period

500000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. America Votes

Mailing Address 1155 Connecticut Ave NW
Ste 600

City
Washington

State
DC

Zip Code
20036-4324

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 17 / 2018

Transaction ID : VTEF8V5V2T7

Amount of Each Receipt this Period

1000000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Belt, Jeff, , ,

Mailing Address 35 Newman Pl

City
Buffalo

State
NY

Zip Code
14210-2619

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SolEpoxy, Inc.

Occupation (for Individual)
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 05 / 2018

Transaction ID : VTEF8V3KZ97

Amount of Each Receipt this Period

500.00

☐ Memo Item

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶

1500500.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ActBlue

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2158.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2018

Transaction ID : VTEF8V3KZ97E

Amount of Each Receipt this Period

500.00

☒ Memo Item

Note: Above Contribution earmarked through this
organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Black Progressive Action Coalition

Mailing Address 700 13th St NW
Ste 600

City

Washington

State

DC

Zip Code

20005-5998

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

115929.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 01 / 2018

Transaction ID : VTEF8VEXYX6

Amount of Each Receipt this Period

115929.28

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cardwell, Kaloma, , ,

Mailing Address 10 W 135th St
Apt 1B

City

New York

State

NY

Zip Code

10037-2604

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Davis Polk & Wardwell LLP

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2018

Transaction ID : VTEF8V3PFS4

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

115954.28

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Civic Participation Action Fund

Mailing Address 818 Connecticut Ave NW

City
Washington

State
DC

Zip Code
20006-2701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 01 / 2018

Transaction ID : VTEF8V3AM27

Amount of Each Receipt this Period

300000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dodds-Brown, Sarah, , ,

Mailing Address 11 Slocum St

City
New Rochelle

State
NY

Zip Code
10801-2708

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
American Express Company

Occupation (for Individual)
Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2018

Transaction ID : VTEF8V5V2F0

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fliegelman, Sandra, , ,

Mailing Address 242 W Washington Blvd

City
Lombard

State
IL

Zip Code
60148-2547

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Options Clearing Corporation

Occupation (for Individual)
Lead Systems Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 02 / 2018

Transaction ID : VTEF8TMN4E7

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

310100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hassey, Kate, , ,

Mailing Address 209 Fair Oaks St

City

San Francisco

State

CA

Zip Code

94110-2928

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

MM / DD / YYYY
10 / 05 / 2018

Transaction ID : VTEF8TQ4MQ1

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kaehn, Max, , ,

Mailing Address 234 N Murphy Ave

City

Sunnyvale

State

CA

Zip Code

94086-5048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Google LLC

Occupation (for Individual)
Senior Software Engineer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
10 / 13 / 2018

Transaction ID : VTEF8V0D634

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lee, Roz, , ,

Mailing Address 381 Malcolm X Blvd
Apt 4D

City

New York

State

NY

Zip Code

10027-2173

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Arcus Foundation

Occupation (for Individual)
Program Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
10 / 03 / 2018

Transaction ID : VTEF8V3KZK6

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ActBlue

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2158.67

Date of Receipt

MM / DD / YYYY
10 / 15 / 2018

Transaction ID : VTEF8V3KZK6E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ono, Catherine, , ,

Mailing Address 3595 Granada Ave
319

City

Santa Clara

State

CA

Zip Code

95051-7601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oracle Corporation

Occupation (for Individual)

Software Developer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

MM / DD / YYYY
10 / 02 / 2018

Transaction ID : VTEF8TMN4H0

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pond, Walker, , ,

Mailing Address 2812 Miriam St S

City

Gulfport

State

FL

Zip Code

33711-3720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)

Artist

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
10 / 16 / 2018

Transaction ID : VTEF8V4EYC2

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ponte, Maya, , ,

Mailing Address 309 Plymouth Rd

City

Lower Gwynedd

State

PA

Zip Code

19002-1962

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Ringfeil Advanced Dermatology

Occupation (for Individual)

Physician

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 06 / 2018

Transaction ID : VTEF8V3KZ89

Amount of Each Receipt this Period

500.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ActBlue

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2158.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2018

Transaction ID : VTEF8V3KZ89E

Amount of Each Receipt this Period

500.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Service Employees International Union Political Education & Action Fund

Mailing Address 1800 Massachusetts Ave NW

City

Washington

State

DC

Zip Code

20036-1806

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

300000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2018

Transaction ID : VTEF8VA1N40

Amount of Each Receipt this Period

100000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

100500.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 34

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Simon, Deborah, J, ,

Mailing Address 950 Laurelwood

City
Carmel

State
IN

Zip Code
46032-8738

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Philanthropist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 10 / 2018

Transaction ID : VTEF8TWW3V7

Amount of Each Receipt this Period

500000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. State Victory Action

Mailing Address PO Box 645

City
Raleigh

State
NC

Zip Code
27602-0645

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2018

Transaction ID : VTEF8V8GWM5

Amount of Each Receipt this Period

200000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Townsley, David, , ,

Mailing Address 900 Minnesota St
Unit 11

City
San Francisco

State
CA

Zip Code
94107-3586

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Amazon.com Inc

Occupation (for Individual)

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

175.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 11 / 2018

Transaction ID : VTEF8TY8H17

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

700010.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Townsley, David, , ,

Mailing Address 900 Minnesota St
Unit 11

City
San Francisco

State
CA

Zip Code
94107-3586

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Amazon.com Inc

Occupation (for Individual)
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 06 / 2018

Transaction ID : VTEF8V3KZM4

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ActBlue

Mailing Address PO Box 441146

City
West Somerville

State
MA

Zip Code
02144-0031

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2158.67

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 15 / 2018

Transaction ID : VTEF8V3KZM4E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

50.00

2752344.28

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 34
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NEA Advocacy Fund

Mailing Address 1201 16th St NW
Ste 418

City
Washington

State
DC

Zip Code
20036-3201

FEC ID number of contributing
federal political committee.

C

C00489815

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 12 / 2018

Transaction ID : VTEF8V3AKJ1

Amount of Each Receipt this Period

150000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

150000.00

TOTAL This Period (last page this line number only)..... ►

150000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 34

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 336 Summer St

City
SomervilleState
MAZip Code
02144-3146Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2018

FEC Identification Number

C**Transaction ID : VTDG0AAGB**

Amount of Each Disbursement this Period

71.42

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 336 Summer St

City
SomervilleState
MAZip Code
02144-3146Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2018

FEC Identification Number

C**Transaction ID : VTDG0AA8W**

Amount of Each Disbursement this Period

13.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Adrienne ShropshireMailing Address 2090 Adam Clayton Powell Jr Blvd
Ste 201ACity
New YorkState
NYZip Code
10027-4974Purpose of Disbursement
Strategic Consulting Services & Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		01		2018

FEC Identification Number

C**Transaction ID : VTDG0AAFE**

Amount of Each Disbursement this Period

7639.93

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7725.28

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 34

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name (Last, First, Middle Initial)

A. Amalgamated Bank, N. A.

Mailing Address 1825 K St NW

City
WashingtonState
DCZip Code
20006-1245Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2018			

FEC Identification Number

C**Transaction ID : VTDG0AAR4I**

Amount of Each Disbursement this Period

254.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address 200 Vesey St

City
New YorkState
NYZip Code
10285-1000Purpose of Disbursement
Credit Card Payment, See Below

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2018			

FEC Identification Number

C**Transaction ID : VTDG0AAHZI**

Amount of Each Disbursement this Period

5045.83

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Action NetworkMailing Address 1900 L St NW
Ste 900City
WashingtonState
DCZip Code
20036-5005Purpose of Disbursement
Email Service

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2018			

FEC Identification Number

C**Transaction ID : VTDG0AAJ4I**

Amount of Each Disbursement this Period

150.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5299.90

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 34

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Black PAC

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address 200 Vesey St

City
New YorkState
NYZip Code
10285-1000Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2018			

FEC Identification Number

C

Transaction ID : VTDG0AAHZ

Amount of Each Disbursement this Period

27.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2018			

FEC Identification Number

C

Transaction ID : VTDG0AAJ4K

Amount of Each Disbursement this Period

3133.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. HotelTonightMailing Address 901 Market St
Ste 310City
San FranciscoState
CAZip Code
94103-1752Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2018			

FEC Identification Number

C

Transaction ID : VTDG0AAJ0:

Amount of Each Disbursement this Period

525.00

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 34

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Black PAC

Full Name (Last, First, Middle Initial)

A. Matrix

Mailing Address 1115 Yonkers Ave

City
YonkersState
NYZip Code
10704-3221Purpose of Disbursement
Travel

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2018			

FEC Identification Number

C **Transaction ID : VTDG0AAJ4I**

Amount of Each Disbursement this Period

 82.60☒ Memo Item

Full Name (Last, First, Middle Initial)

B. The Westin

Mailing Address 1 Star Pt

City
StamfordState
CTZip Code
06902-8911Purpose of Disbursement
Travel

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2018			

FEC Identification Number

C **Transaction ID : VTDG0AAJ4I**

Amount of Each Disbursement this Period

 822.02☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address PO Box 4830

City
TrentonState
NJZip Code
08650-4830Purpose of Disbursement
Telephone

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2018			

FEC Identification Number

C **Transaction ID : VTDG0AAJ4I**

Amount of Each Disbursement this Period

 50.05☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 34

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Black PAC

Full Name (Last, First, Middle Initial)

A. BLDG Management Co. Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		16		2018

Mailing Address 417 5th Ave
FL 4City
New YorkState
NYZip Code
10016-2239Purpose of Disbursement
Rent

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTDG0AAH8'

Amount of Each Disbursement this Period

1584.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Brilliant Corners Research & Strategies

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		05		2018

Mailing Address 1250 I St NW
Ste 1003City
WashingtonState
DCZip Code
20005-3939Purpose of Disbursement
Polling Services & Travel

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

FEC Identification Number

C

Transaction ID : VTDG0AA9QI

Amount of Each Disbursement this Period

46475.21

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NGP VAN, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		10		2018

Mailing Address PO Box 392264

City
PittsburghState
PAZip Code
15251-9264Purpose of Disbursement
Database Services

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTDG0AABE

Amount of Each Disbursement this Period

400.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

48459.59

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 34

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Black PAC

Full Name (Last, First, Middle Initial)

A. Nubia Scott-Bennett

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		02		2018

Mailing Address 1230 Croes Ave
19-HCity
BronxState
NYZip Code
10472-4536Purpose of Disbursement
Communications & Organizational Consulting Services

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTDG0AAFEI

Amount of Each Disbursement this Period

 2500.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sage Payment Solutions

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		01		2018

Mailing Address 12120 Sunset Hills Rd
Ste 500City
RestonState
VAZip Code
20190-5858Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTDG0AAR4f

Amount of Each Disbursement this Period

 168.66☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SLW Strategies

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		02		2018

Mailing Address 3256 Theodore R Hagans Dr NE

City
WashingtonState
DCZip Code
20018-4319Purpose of Disbursement
Strategic Consulting Services

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTDG0AAFE

Amount of Each Disbursement this Period

 3000.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 5668.66 67153.43

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 34

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Black PAC

Full Name (Last, First, Middle Initial)

A. Center for Racial and Gender Equity

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2018

Mailing Address 500 E 61st St
Ste BCity
ChicagoState
ILZip Code
60637-2545Purpose of Disbursement
Donation

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : VTDG0AAHD**

Amount of Each Disbursement this Period

85000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Media Fortitude Partners

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2018

Mailing Address 30 Newport Pkwy
Apt 2110City
Jersey CityState
NJZip Code
07310-1512Purpose of Disbursement
Nonfederal Independent Expenditure Supporting Stacey Abrams for Governor

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : VTDG0AAR57**

Amount of Each Disbursement this Period

172500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. OTG Strategies

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		01		2018

Mailing Address 10130 Perimeter Pkwy
Ste 200City
CharlotteState
NCZip Code
28216-0197Purpose of Disbursement
Nonfederal Independent Expenditure Supporting Andrew Gillum for Governor

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : VTDG0AAR4**

Amount of Each Disbursement this Period

115929.28

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

373429.28

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 34

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Black PAC

Full Name (Last, First, Middle Initial)

A. OTG StrategiesMailing Address 10130 Perimeter Pkwy
Ste 200City
CharlotteState
NCZip Code
28216-0197Purpose of Disbursement
Nonfederal Independent Expenditure Supporting Andrew Gillum for Governor

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	7			2	0	1	8		

FEC Identification Number

C**Transaction ID : VTDG0AAR4.**

Amount of Each Disbursement this Period

209045.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Resonance Campaigns LLCMailing Address 1020 16th St NW
Ste 701City
WashingtonState
DCZip Code
20036-5730Purpose of Disbursement
Nonfederal Independent Expenditure Supporting Andrew Gillum for Governor

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	6			2	0	1	8		

FEC Identification Number

C**Transaction ID : VTDG0AAR5.**

Amount of Each Disbursement this Period

9870.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

218915.00

592344.28

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 24 OF 34

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Black PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Burrell Communications Group, LLC

Nature of Debt (Purpose):

Media Buy - Radio Estimate

Mailing Address 233 N Michigan Ave
Ste 2900City
ChicagoState
ILZip Code
60601-5709

Outstanding Balance Beginning This Period

0.00

Transaction ID : VTBHG9HA848

Amount Incurred This Period

53690.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

53690.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Burrell Communications Group, LLC

Nature of Debt (Purpose):

Media Buy - Radio Estimate

Mailing Address 233 N Michigan Ave
Ste 2900City
ChicagoState
ILZip Code
60601-5709

Outstanding Balance Beginning This Period

0.00

Transaction ID : VTBHG9HA856

Amount Incurred This Period

125696.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

125696.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Burrell Communications Group, LLC

Nature of Debt (Purpose):

Media Buy - Radio Estimate

Mailing Address 233 N Michigan Ave
Ste 2900City
ChicagoState
ILZip Code
60601-5709

Outstanding Balance Beginning This Period

0.00

Transaction ID : VTBHG9HA864

Amount Incurred This Period

39807.73

Payment This Period

0.00

Outstanding Balance at Close of This Period

39807.73

1) SUBTOTALS This Period This Page (optional)..... ►

219193.73

2) TOTALS This Period (last page this line number only)..... ►

219193.73

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

219193.73

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 25 OF 34
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Black PAC	FEC IDENTIFICATION NUMBER ▼ C C00609388
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Check if ☐ 24-hour report ☐ 48-hour report ☒ New report Amends report filed on / /

Full Name of Payee Burrell Communications Group, LLC <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 233 N Michigan Ave Ste 2900			Amount <input type="text"/> 125696.00 Transaction ID : VTDG0AAHB18 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City Chicago	State IL	Zip Code 60601-5709	
Purpose of Expenditure Media Buy - Radio Estimate		Category/ Type <input type="text"/>	
Name of Federal Candidate: Nelson, Bill, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 252320.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Burrell Communications Group, LLC <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
* Remainder of \$59,064 independent expenditure to be paid in next reporting period.			Amount <input type="text"/> 39807.73 Transaction ID : VTDG0AAHB42 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 233 N Michigan Ave Ste 2900			
City Chicago	State IL	Zip Code 60601-5709	
Purpose of Expenditure Media Buy - Radio Estimate		Category/ Type <input type="text"/>	
Name of Federal Candidate: McCaskill, Claire, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>MO</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 93165.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Shropshire, Adrienne, R., ,

[Electronically Filed]

Date

/ /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 26 OF 34
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Black PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00609388 </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Burrell Communications Group, LLC <small>*</small>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 233 N Michigan Ave Ste 2900			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">53690.00</div>	
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : VTDG0AAHBF8 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Media Buy - Radio Estimate			Category/ Type <div style="border: 1px solid black; padding: 2px; width: 50px;"></div>	
Name of Federal Candidate: Donnelly, Joseph, S., ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>IN</u> </div> </div>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">84460.00</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____				

Full Name of Payee <input type="checkbox"/> Memo Item Burrell Communications Group, LLC Adjusted from estimate of \$10,641.00			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address 233 N Michigan Ave Ste 2900			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5540.00</div>	
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : VTDG0AAA8X8 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Media Production Costs			Category/ Type <div style="border: 1px solid black; padding: 2px; width: 50px;"></div>	
Name of Federal Candidate: Nelson, Bill, , ,			<div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose </div> <div> Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>FL</u> </div> </div>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">252320.00</div>	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____				

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;">5540.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Shropshire, Adrienne, R., ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 27 OF 34
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Black PAC				FEC IDENTIFICATION NUMBER ▼ C C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Burrell Communications Group, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 233 N Michigan Ave Ste 2900			Amount 121084.00		
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : VTDG0AAA8Y6		
Purpose of Expenditure Media Buy - Radio		Category/ Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 16 / 2018		
Name of Federal Candidate: Nelson, Bill, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought 252320.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ► _____		
Full Name of Payee Burrell Communications Group, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 233 N Michigan Ave Ste 2900			Amount 19130.00		
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : VTDG0AAA902		
Purpose of Expenditure Media Buy - Radio		Category/ Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 16 / 2018		
Name of Federal Candidate: Bredesen, Philip, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought 101577.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ► _____		
(a) SUBTOTAL of Itemized Independent Expenditures			140214.00		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			 		
(c) TOTAL Independent Expenditures			 		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 25 / 2018	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 28 OF 34
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Black PAC			FEC IDENTIFICATION NUMBER ▼ C C00609388		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on MM / DD / YYYY		
Full Name of Payee <input type="checkbox"/> Memo Item Burrell Communications Group, LLC Adjusted from estimate of \$10,146			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2018		
Mailing Address 233 N Michigan Ave Ste 2900			Amount 13052.00		
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : VTDG0AAA910 Date of Disbursement or Obligation MM / DD / YYYY 10 / 16 / 2018		
Purpose of Expenditure Media Production Costs		Category/ Type 			
Name of Federal Candidate: Bredesen, Philip, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought 101577.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item Burrell Communications Group, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2018		
Mailing Address 233 N Michigan Ave Ste 2900			Amount 13504.00		
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : VTDG0AAA928 Date of Disbursement or Obligation MM / DD / YYYY 10 / 16 / 2018		
Purpose of Expenditure Media Buy - Radio		Category/ Type 			
Name of Federal Candidate: McCaskill, Claire, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought 93165.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			26556.00		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			 		
(c) TOTAL Independent Expenditures			 		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date MM / DD / YYYY 10 / 25 / 2018	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE	29	OF	34
FOR LINE 24 OF FORM 3X			

NAME OF COMMITTEE (In Full) Black PAC		FEC IDENTIFICATION NUMBER ▼ C C00609388																									
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>		M	M	/	D	D	/	Y	Y	Y	Y	Y	Y												
M	M	/	D	D	/	Y	Y	Y	Y	Y	Y																

Full Name of Payee Burrell Communications Group, LLC Adjusted from estimate of \$10,222.00			<input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>10</td><td></td><td></td><td>08</td><td></td><td></td><td>2018</td><td></td><td></td><td></td><td></td><td></td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	Y	Y	10			08			2018					
M	M	/	D	D	/	Y	Y	Y	Y	Y	Y																					
10			08			2018																										
Mailing Address 233 N Michigan Ave Ste 2900						Amount <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>13139.00</td><td></td></tr></table>																									13139.00	
										13139.00																						
City Chicago	State IL	Zip Code 60601-5709				Transaction ID : VTDG0AAA944 Date of Disbursement or Obligation <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>10</td><td></td><td></td><td>16</td><td></td><td></td><td>2018</td><td></td><td></td><td></td><td></td><td></td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	Y	Y	10			16			2018					
M	M	/	D	D	/	Y	Y	Y	Y	Y	Y																					
10			16			2018																										
Purpose of Expenditure Media Production Costs			Category/ Type <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																													
Name of Federal Candidate: McCaskill, Claire, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MO																										
Calendar Year-To-Date Per Election for Office Sought			<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>93165.00</td><td></td></tr></table>																									93165.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
										93165.00																						

Full Name of Payee Burrell Communications Group, LLC Adjusted from estimate of \$10,222.00			<input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>10</td><td></td><td></td><td>08</td><td></td><td></td><td>2018</td><td></td><td></td><td></td><td></td><td></td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	Y	Y	10			08			2018					
M	M	/	D	D	/	Y	Y	Y	Y	Y	Y																					
10			08			2018																										
Mailing Address 233 N Michigan Ave Ste 2900						Amount <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>9560.00</td><td></td></tr></table>																									9560.00	
										9560.00																						
City Chicago	State IL	Zip Code 60601-5709				Transaction ID : VTDG0AAA9A1 Date of Disbursement or Obligation <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>10</td><td></td><td></td><td>16</td><td></td><td></td><td>2018</td><td></td><td></td><td></td><td></td><td></td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	Y	Y	10			16			2018					
M	M	/	D	D	/	Y	Y	Y	Y	Y	Y																					
10			16			2018																										
Purpose of Expenditure Media Buy - Radio			Category/ Type <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																													
Name of Federal Candidate: Rosen, Jacky, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV																										
Calendar Year-To-Date Per Election for Office Sought			<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>29233.00</td><td></td></tr></table>																									29233.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
										29233.00																						

(a) SUBTOTAL of Itemized Independent Expenditures	▶	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>22699.00</td><td></td></tr></table>																							22699.00	
										22699.00																
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																								
(c) TOTAL Independent Expenditures	▶	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																								

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Shropshire, Adrienne, R., ,

[Electronically Filed]

Date

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			25			2018					

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 30 OF 34
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Black PAC				FEC IDENTIFICATION NUMBER ▼ C C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Burrell Communications Group, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Mailing Address 233 N Michigan Ave Ste 2900			Amount 10113.00		
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : VTDG0AAA9B9 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 16 / 2018		
Purpose of Expenditure Media Production Costs		Category/ Type 	Name of Federal Candidate: Rosen, Jacky, , ,		
		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought		29233.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee Burrell Communications Group, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 08 / 2018		
Adjusted from estimate of \$12,352.00			Amount 9929.00		
Mailing Address 233 N Michigan Ave Ste 2900			Transaction ID : VTDG0AAA9G9 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 16 / 2018		
City Chicago	State IL	Zip Code 60601-5709	Name of Federal Candidate: Donnelly, Joseph, S., ,		
Purpose of Expenditure Media Buy - Radio		Category/ Type 	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IN		
Calendar Year-To-Date Per Election for Office Sought		84460.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures			20042.00		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			 		
(c) TOTAL Independent Expenditures			 		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 25 / 2018	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE	31	OF	34
FOR LINE 24 OF FORM 3X			

NAME OF COMMITTEE (In Full) Black PAC	FEC IDENTIFICATION NUMBER ▼ C C00609388
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Check if ☐ 24-hour report ☐ 48-hour report ☒ New report Amends report filed on / /

Full Name of Payee Burrell Communications Group, LLC Adjusted from estimate of \$10,435.00	<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 233 N Michigan Ave Ste 2900		Amount <input type="text"/> 13383.00
City Chicago	State IL	Zip Code 60601-5709
Purpose of Expenditure Media Production Costs	Category/ Type <input type="text"/>	Transaction ID : VTDG0AAA9H6 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Donnelly, Joseph, S., ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IN
Calendar Year-To-Date Per Election for Office Sought	<input type="text"/> 84460.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Burrell Communications Group, LLC	<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 233 N Michigan Ave Ste 2900		Amount <input type="text"/> 61937.00
City Chicago	State IL	Zip Code 60601-5709
Purpose of Expenditure Media Buy - Radio	Category/ Type <input type="text"/>	Transaction ID : VTDG0AAHB26 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Bredesen, Philip, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: TN
Calendar Year-To-Date Per Election for Office Sought	<input type="text"/> 101577.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 75320.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Shropshire, Adrienne, R., ,

[Electronically Filed]

Date

 / /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 32 OF 34
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Black PAC				FEC IDENTIFICATION NUMBER ▼ C C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Burrell Communications Group, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 15 / 2018		
Mailing Address 233 N Michigan Ave Ste 2900			Amount 7458.00		
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : VTDG0AAHB34		
Purpose of Expenditure Media Production Costs		Category/ Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 16 / 2018		
Name of Federal Candidate: Bredesen, Philip, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought 101577.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Burrell Communications Group, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 15 / 2018		
Mailing Address 233 N Michigan Ave Ste 2900			Amount 7458.00		
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : VTDG0AAHBD3		
Purpose of Expenditure Media Production Costs		Category/ Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 16 / 2018		
Name of Federal Candidate: McCaskill, Claire, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought 93165.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			14916.00		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			 		
(c) TOTAL Independent Expenditures			 		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 25 / 2018	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 33 OF 34
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Black PAC				FEC IDENTIFICATION NUMBER ▼ C C00609388	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Burrell Communications Group, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 15 / 2018		
Mailing Address 233 N Michigan Ave Ste 2900			Amount 9560.00		
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : VTDG0AAHBE1		
Purpose of Expenditure Media Buy - Radio		Category/ Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 16 / 2018		
Name of Federal Candidate: Rosen, Jacky, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought 29233.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ► _____		
Full Name of Payee Burrell Communications Group, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 15 / 2018		
Mailing Address 233 N Michigan Ave Ste 2900			Amount 7458.00		
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : VTDG0AAHBG6		
Purpose of Expenditure Media Production Costs		Category/ Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 16 / 2018		
Name of Federal Candidate: Donnelly, Joseph, S., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought 84460.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ► _____		
(a) SUBTOTAL of Itemized Independent Expenditures			17018.00		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			 		
(c) TOTAL Independent Expenditures			 		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 25 / 2018	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 34 OF 34
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Black PAC			FEC IDENTIFICATION NUMBER ▼ C C00609388		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report <input type="checkbox"/> Amends report filed on <input type="text" value="MM/DD/YYYY"/>		
Full Name of Payee <input type="checkbox"/> Memo Item Burrell Communications Group, LLC Partial payment of \$59,064 independent expenditure. Remainder to be paid in next reporting			Date of Public Distribution/Dissemination <input type="text" value="MM/DD/YYYY"/> 10 / 15 / 2018		
Mailing Address 233 N Michigan Ave Ste 2900			Amount <input type="text" value="19256.27"/>		
City Chicago	State IL	Zip Code 60601-5709	Transaction ID : VTDG0AAR893 Date of Disbursement or Obligation <input type="text" value="MM/DD/YYYY"/> 10 / 16 / 2018		
Purpose of Expenditure Media Buy - Radio		Category/ Type <input type="text"/>			
Name of Federal Candidate: McCaskill, Claire, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: MO		
Calendar Year-To-Date Per Election for Office Sought		<input type="text" value="93165.00"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <input type="text" value="MM/DD/YYYY"/>		
Mailing Address			Amount <input type="text" value=""/>		
City	State	Zip Code	Date of Disbursement or Obligation <input type="text" value="MM/DD/YYYY"/>		
Purpose of Expenditure		Category/ Type <input type="text"/>			
Name of Federal Candidate:		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: <input type="text"/>		
Calendar Year-To-Date Per Election for Office Sought		<input type="text" value=""/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<input type="text" value="19256.27"/>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<input type="text" value=""/>		
(c) TOTAL Independent Expenditures			<input type="text" value="341561.27"/>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Shropshire, Adrienne, R., ,</i>		[Electronically Filed]		Date <input type="text" value="MM/DD/YYYY"/> 10 / 25 / 2018	